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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 24528-71531US	
(Only for new nonprovisional applications under 37 CFR 1.53(b))		First Named Inventor Will Shatford	
		Title Biometric Based Authentication System with Random Generated PIN	
		Express Mail Label No. EV222867566US	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDRESS TO: BOX PATENT APPLICATION Assistant Commissioner for Patents PO Box 1450, Alexandria, VA 22313	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification Total Pages [12] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) (Nos. 1-14) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Pages [4] 5. <input checked="" type="checkbox"/> Oath or Declaration Total Pages [2] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation divisional with Box 18 completed)</i> <ul style="list-style-type: none"> i. DELETION OF INVENTOR(S) <ul style="list-style-type: none"> <input type="checkbox"/> Signed statement attached deleting inventor(s) named in the prior application (see 37 CFR 1.63(d)(2) and 1.33(b)) 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies 	
		ACCOMPANYING APPLICATION PARTS	
		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). 16. <input type="checkbox"/> Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other:	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: </div> <div style="display: flex; justify-content: space-between;"> Prior application information: Examiner: Group Art Unit: </div> For CONTINUATION OR DIVISIONAL APPS ONLY: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relief upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS			
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Name (Print/Type)	Evelyn H. McConathy	Registration No. (Attorney/Agent)	35,279
Signature	<i>Evelyn H. McConathy</i>	Date	July 3, 2003

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$375.00)

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number **50-0979**

Deposit Account Name **Dilworth Paxson LLP**

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee required under 37 CFR 1.16 and 1.17

☐ Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	\$ 375
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					\$ 375

2. EXTRA CLAIMS FEES FOR UTILITY AND REISSUE

	Extra Claims		Fee from below		Fee Paid
Total Claims	14	-20**	= 0	X * =	\$ 0
Independent Claims	3	- 3**	= 0	X * =	\$ 0
Multiple Independent			+ 280/140=		\$

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 0

**or number previously paid, if greater; For Reissue, see above

SUBMITTED BY CUSTOMER NO. 27730

Complete (if applicable)

Complete if known	
Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Will Shatford
Examiner Name	TBA
Group Art Unit	TBA
Attorney Docket No.	24528-71531US

3. ADDITIONAL FEES

Fee Code	Large Entity Fee (\$)	Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130			Non-English specification	
1812	2,520			For filing a request for <i>ex parte</i> reexamination	
1804	920*			Requesting publication of SIR prior to Examiner action	
1805	1,840*			Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510			Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130			Petition to the Commissioner	
1807	50			Processing fee under 37 CFR 1.17(q)	
1806	180			Submission of Information Disclosure Stmt	
8021	40			Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900			Request for expedited examination of a design application	
Other fee (specify)					

Reduced by Basic Filing Fee Paid **SUBTOTAL (3)** **\$0**

Name (Print/Type)	Evelyn H. McConathy	Registration No. (Attorney/Agent)	35,279	Telephone	(215) 575-7000
Signature	<i>Evelyn H. McConathy</i>	Date	July 3, 2003		